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Bib Data Sheet

CONFIRMATION NO. 5515

|  |   |   |   |  |                                    |
|--|---|---|---|--|------------------------------------|
| <b>SERIAL NUMBER</b><br>09/435,657   | <b>FILING OR 371(c)<br/>DATE</b><br>11/08/1999<br><b>RULE</b>   | <b>CLASS</b><br>370                     | <b>GROUP ART UNIT</b><br>2667   | <b>ATTORNEY<br/>DOCKET NO.</b><br>19447-P001CI |                                    |
| <b>APPLICANTS</b><br>JOHN L. TOMICH, COPPELL, TX;<br>MICHAEL J. VONAHNEN, DALLAS, TX;<br>MICHAEL B. SCHEEHAN, PROSPER, TX                        |   |   |   |  |                                    |
| <b>** CONTINUING DATA *****</b>  |   |   |   |  |                                    |
| <b>** FOREIGN APPLICATIONS *****</b>   |   |   |   |  |                                    |
| <b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED** SMALL ENTITY **</b><br>** 12/02/1999  |   |   |   |  |                                    |
| Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no   |   | <b>STATE OR<br/>COUNTRY</b><br>TX       | <b>SHEETS<br/>DRAWING</b><br>10   | <b>TOTAL<br/>CLAIMS</b><br>15                  | <b>INDEPENDENT<br/>CLAIMS</b><br>3 |
| 35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance |   |   |   |  |                                    |
| Verified and Acknowledged  |   | Examiner's Signature <i>[Signature]</i> |   | Initials                                       |                                    |
| <b>ADDRESS</b><br>JACKSON WALKER LLP<br>2435 NORTH CENTRAL EXPRESSWAY<br>SUITE 600<br>RICHARDSON, TX 75080                                       |   |   |   |  |                                    |
| <b>TITLE</b><br>PHOTONIC HOME AREA NETWORK   |   |   |   |  |                                    |
| <b>FILING FEE<br/>RECEIVED</b><br>1087   | FEES: Authority has been given in Paper<br>No. _____ to charge/credit DEPOSIT ACCOUNT<br>No. _____ for following: |   | <input type="checkbox"/> All Fees<br><input type="checkbox"/> 1.16 Fees ( Filing )<br><input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )<br><input type="checkbox"/> 1.18 Fees ( Issue )<br><input type="checkbox"/> Other _____<br><input type="checkbox"/> Credit |  |                                    |

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| SERIAL NUMBER<br>09/435,657 | FILING DATE<br>11/08/99 | CLASS<br>370 | GROUP ART UNIT<br>2739 | ATTORNEY DOCKET NO.<br>19447-P001CI |
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|---|---|
| APPLICANT   | JOHN L. TOMICH, COPPELL, TX; MICHAEL J. VONAHNEN, DALLAS, TX; MICHAEL B. SCHEEHAN, PROSPER, TX. |
|   | <b>**CONTINUING DOMESTIC DATA*****</b><br>VERIFIED<br><u>NO PG</u>                              |
|   | <b>**371 (NAT'L STAGE) DATA*****</b><br>VERIFIED<br><u>NO PG</u>                                |
|   | <b>**FOREIGN APPLICATIONS*****</b><br>VERIFIED<br><u>NO PG</u>                                  |
| IF REQUIRED, FOREIGN FILING LICENSE GRANTED 12/02/99 ** SMALL ENTITY ** |   |

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|---|--|---|------------------------|----------------------|--------------------|-------------------------|
| Foreign Priority claimed<br>35 USC 119 (a-d) conditions met | <input type="checkbox"/> yes <input checked="" type="checkbox"/> no<br><input type="checkbox"/> yes <input checked="" type="checkbox"/> no | <input type="checkbox"/> Met after Allowance<br><input checked="" type="checkbox"/> Met after Allowance | STATE OR COUNTRY<br>TX | SHEETS DRAWING<br>10 | TOTAL CLAIMS<br>15 | INDEPENDENT CLAIMS<br>3 |
| Verified and Acknowledged                                   |  |   | Examiner's Initials    | Initials             |                    |                         |

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|-------|----------------------------|
| TITLE | PHOTONIC HOME AREA NETWORK |
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| FILING FEE RECEIVED<br>\$445 | FEES: Authority has been given in Paper<br>No. _____ to charge/credit DEPOSIT ACCOUNT<br>NO. _____ for the following: | <input type="checkbox"/> All Fees<br><input type="checkbox"/> 1.16 Fees (Filing)<br><input type="checkbox"/> 1.17 Fees (Processing Ext. of time)<br><input type="checkbox"/> 1.18 Fees (Issue)<br><input type="checkbox"/> Other _____<br><input type="checkbox"/> Credit |
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